|  |  |  |                                       |                                |  |                  |             | Application or Docket Number |  |                     |                            |                        |  |  |
|--|--|--|---------------------------------------|--------------------------------|--|------------------|-------------|------------------------------|--|---------------------|----------------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECOR   |  |  |                                       |                                |  |                  |             |                              | in internation                                   |                     |                            |                        |  |  |
| Effective October 1, 2003  |  |  |                                       |                                |  |                  |             |                              |  |                     |                            |                        |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |  |                                       |                                |  |                  |             | SMALL ENTITY TYPE            |  |                     | OTHER THAN OR SMALL ENTITY |                        |  |  |
| TOTAL CLAIMS   |  |  | 89                                    | A                              |  |                  | 1           | RATE                         | FEE  | 7                   | RATE                       | FEE                    |  |  |
| FOR  |  |  | NUMBER                                | FILED                          | NUMBER EXTRA                                 |                  |             | BASIC FE                     | E 385.00   | OR                  | BASIC FEE                  | 770.00                 |  |  |
| TOTAL CHÄRGEABLE CLAIMS  |  |  | 29 min                                | us 20=                         | · 69   |                  |             | X\$ 9=                       |  | OR                  | X\$18=                     | 1282                   |  |  |
| INDEPENDENT CLAIMS   |  |  | y Ø mi                                | nus 3 =                        | * 10   |                  |             | X43=                         |  | OR                  | X86=                       | 260                    |  |  |
| MU   | ILTIPLE DEPEN                                  | IDENT CLAIM PI                             | RESENT                                |                                |  |                  |             | +145=                        | <del> </del>                                     | OR                  | +290=                      |                        |  |  |
| * If   | the difference                                 | in column 1 is                             | less than zero, enter "0" in column 2 |                                |  |                  |             | TOTAL                        |  | OR                  | TOTAL                      | 2072                   |  |  |
| CLAIMS AS AMENDED - PART II  |  |  |                                       |                                |  |                  |             |                              | <del></del>                                      | J                   | OTHER                      |                        |  |  |
|  | (Column 1) · (Column 2) (Column 3)             |  |                                       |                                |  |                  |             | SMALL                        | . ENTITY   | OR                  | SMALL                      |                        |  |  |
| AMENDMENT A  | nlidon   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  | ·                                     | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY                                 | PRESENT<br>EXTRA |             | RATE                         | ADDI-<br>TIONAL<br>FEE                           |                     | RATE (                     | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total  | . 89                                       | Minus                                 | #8                             | 9  | =                |             | X\$ 9=                       | 1  | OR                  | X\$18=                     | \                      |  |  |
|  | Independent                                    | . 13                                       | Minus                                 | ***/                           | 3  | =                |             | X43=                         | 1  | OR                  | X86=                       |                        |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA   |  |                                       |                                |  |                  | J           | +145=                        |  |                     | +290=                      |                        |  |  |
| 15.8.12 16 21 21 28 3V, 49 67, 77, 62 - TOTAL  |  |  |                                       |                                |  |                  |             |                              |  |                     | TOTAL                      | $\overline{}$          |  |  |
|  |  |  |                                       |                                |  |                  |             | ADDIT. FE                    |  | OR                  | ADDIT. FEE                 | $\mathcal{H}$          |  |  |
| Ė  | <del></del>                                    | (Column 1)                                 |                                       | (Colur<br>HIGH                 |  | (Column 3)       | 1 г         |                              | ADDI-  | 1                   |                            | ADDI-                  |  |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT            |                                       | NUMI<br>PREVIO<br>PAID         | DUSLY  | PRESENT<br>EXTRA |             | RATE                         | TIONAL   |                     | RATE                       | TIONAL<br>FEE          |  |  |
|  | Total  | *  | Minus                                 | **                             |  | =                |             | X\$ 9=                       |  | OR                  | X\$18=                     |                        |  |  |
|  | Independent                                    | *  | Minus                                 | ***                            |  | =                |             | X43=                         |  | OR                  | X86=                       |                        |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                |  |                  | 1           | +145=                        |  | OR                  | +290=                      |                        |  |  |
| TOTAL ADDIT. FEE   |  |  |                                       |                                |  |                  |             |                              | OR   | TOTAL<br>ADDIT. FEE |                            |                        |  |  |
|  |  | (Column 1)                                 |                                       | (Colur                         | nn 2)  | (Column 3)       |             | 10011. T C                   |  |                     | ADDII: 1 EE                |                        |  |  |
|  | `  | CLAIMS                                     |                                       | HIGH                           | EST  |                  | Ìг          |                              | ADDI-  |                     |                            | ADDI-                  |  |  |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>- AMENDMENT          | • • •                                 | PREVIO<br>PAID                 | USLY   | PRESENT<br>EXTRA |             | RATE                         | TIONAL<br>FEE                                    |                     | RATE                       | TIONAL<br>FEE          |  |  |
|  | Total  | *  | Minus                                 | **                             | <u>.                                    </u> | = , ,            | $\ \cdot\ $ | X\$ 9=                       |  | OR                  | X\$18=                     |                        |  |  |
|  | Independent                                    | *  | Minus                                 | ***                            |  | =                | lſ          | X43=                         |  | O'R                 | X86=                       |                        |  |  |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |                                       |                                |  |                  |             |                              | <del>                                     </del> |                     |                            |                        |  |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |  |                                       |                                |  |                  |             |                              |  |                     |                            |                        |  |  |
| ** If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |  |                                       |                                |  |                  |             |                              |  | OR                  | TOTAL<br>ADDIT. FEE        |                        |  |  |
|  | ii the "Highest Nu<br>The "Highest Num         | mber Previously Pai<br>nber Previously Pai | d For" (Total or                      | Independe                      | ent) is the                                  | highest number   | er fou      | nd in the a                  | ppropriate bo                                    | k in co             | lumn 1.                    |                        |  |  |